(c) if so, the details and Government's reaction thereto?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) Health being a State subject, such information is not centrally maintained. The State Pollution Control Board in respect of States and Pollution Control Committee in respect of UTs are the prescribed authorities to implement and enforce Bio-Medical Waste (Management & Handling) Rules, 1998 and amendments thereof.

In so far as Central Government Hospitals namely Safdarjung Hospital, New Delhi, Dr. Ram Manohar Lohia Hospital, New Delhi and Lady Harding Medical College and Shrimati S.K. Hospital, New Delhi are concerned, the Bio-Medical Waste are disposed as per the Bio-Medical Waste (Management & Handling) Rule, 1998.

Deaths due to alcohol consumption

873. SHRIMATI MOHSINA KIDWAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware that a large number of people die/suffer from various ailments due to consumption of alcohol;

(b) if so, the details thereof and whether the consumption of alcohol is also increasing amongst youths and badly affect on their health;

(c) if so, whether Government propose to formulate any strategy to restrict the production and sale of alcohol and to create awareness amongst people not to use alcohol; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) The Government is cognizant of the fact that consumption of alcohol in excessive amounts can lead to social, economic and health related problems and death also in some cases. A study conducted by NIMHANS for WHO published in 2006 shows that nearly 30% of adult men and less than 5% of women consume alcohol giving a male to female ratio of 6: 1. Alcohol use is higher in poor communities. The average age of initiation has reduced from 26 years during the 80s to 20 years in recent years.

(c) and (d) The policy with regard to sale and distribution of alcohol is within the purview of the State Governments. Therefore, the efforts made to contain the damage done by alcoholism vary from State to State. Apart from this, clinical care, building awareness, counseling and rehabilitation is made available through de-addiction centres and counseling centres run/funded by the Government.

Failure of NRHM due to shortage of doctors

†874. SHRI PYARELAL KHANDELWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

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†Original notice of the question was received in Hindi.

(a) whether it is a fact that National Rural Health Mission has not been successful in achieving its targets due to lack of 70 per cent of doctors in rural areas;

(b) whether it is also a fact that sanctioned posts of specialist doctors are lying vacant in large numbers; and

(c) if so, the reasons for not appointing doctors against sanctioned posts?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) No, Sir. Human resource engagement is a major thrust area under NRHM and is a priority being pursued with the States. As reported by the States (August, 2008) a total of 10,489 medical doctors, 2231 Specialists, have also been engaged on contract under NRHM thus significantly adding to the numbers of doctors and specialists in the rural health care system. State Governments appoint doctors against sanctioned posts. They have been directed to fill up existing vacancies.

Financial aid to Bihar under NRHM

875. SHRI ALI ANWAR ANSARI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the fund allocated to the State of Bihar under NRHM in this financial year; district-wise;

(b) the details of ongoing projects like construction of P.H.Cs/district hospital in Buxar district of Bihar;

(c) whether Government has provided enough fund for the completion of these projects; and

(d) how does Government propose to strengthen the health infrastructure in the remote areas of the district?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) During the current Financial Year 2008-09, Rs.695.26 crore has been allocated to Government of Bihar under NRHM. Funds are further distributed among the Districts by the States Government as per their priorities and requirements.

(b) The ongoing projects in the Buxar District include repair and maintenance of Primary Health Centres, construction of sub-centres and upgradation of Primary Health Centres. The details of ongoing project in Buxar district of Bihar is give in the Statement-I *(See* below).

(c) The Government of India and as well the State Government is providing enough funds for the completion of the projects.

(d) Health infrastructure is provided and strengthened on the basis of Government of India norms and District Hospitals, Sub District Hospitals, Community Health Centres, Primary Health Centres and Sub Centres are accordingly established. Based on these norms, new additional Primary Health Centres and Health Sub Centres are being set up in the Buxar District, a list of which is given in the Statement-II and III respectively.